| of \ | ST FELICIANA | _ Parish Constable |
|---|--|--|
| IAO | Ward/District 2 | (O't) I audalana |
| JACI | KSON | (City) Louisiana |
| | Financial Statemen | ts |
| As of and | d for the Year December | 31, _2012 |
| be | uisiana Revised Statutes e filed with the Legislative 0 days after the close of | e Auditor |
| | AFFIDAVIT | |
| | | ned authority, Constable (your name) eposes and says that the financial |
| statements herewith given pre | esent fairly the financia | al position of the Court of <u>EAST</u> |
| FELICIANA Parish, Louisiar | na, as of December 31, | _2012, and the results of operations for |
| the year then ended, on the cash | basis of accounting. | |
| | | |
| In addition, (your name)JO | EL L ODOM | , who duly sworn, deposes, |
| and says that the Constat | | |
| | | venues and other sources for the year |
| | | |
| anded December 31 2012 and | Lacoardinaly in requires | to provide a awarn financial statement |
| | | to provide a sworn financial statement |
| and affidavit and is not required | to provide for an audit, r | to provide a sworn financial statement review/attestation, or compilation report |
| | to provide for an audit, r | |
| and affidavit and is not required | to provide for an audit, r | |
| and affidavit and is not required | to provide for an audit, r | |
| and affidavit and is not required | to provide for an audit, r al year. | |
| and affidavit and is not required for the previously mentioned fisca | to provide for an audit, ral year. | review/attestation, or compilation report |
| and affidavit and is not required | to provide for an audit, ral year. | review/attestation, or compilation report |
| and affidavit and is not required for the previously mentioned fisca | to provide for an audit, ral year. | review/attestation, or compilation report |
| and affidavit and is not required for the previously mentioned fisca | to provide for an audit, ral year. Signa me, this 22rd day of | ture of Constable, 20 3. |
| and affidavit and is not required for the previously mentioned fisca | to provide for an audit, ral year. Signa me, this 22md day of | ture of Constable 20 3 Signature |
| and affidavit and is not required for the previously mentioned fiscal | signa me, this 2nd day of NOTARY PUBLIC S | ture of Constable 203 Signature Please Complete this Section: |
| and affidavit and is not required for the previously mentioned fiscal Sworn to and subscribed before sions of state law, this report is a public state law. | signame, this 22nd day of NOTARY PUBLIC SHOULE. GIMO | ture of Constable , 20 3 Signature Please Complete this Section: JOEL L ODOM |
| and affidavit and is not required for the previously mentioned fiscal state law, this report is a public acopy of the report has been submitted to ad other appropriate public officials. The | me, this 22rd day of NOTARY PUBLIC SHOULE. Constable's Name Street or P.O. Box | ture of Constable 203 Signature Please Complete this Section: |
| and affidavit and is not required for the previously mentioned fiscal states and subscribed before is a public acopy of the report has been submitted to a other appropriate public officials. The ailable for public inspection at the Baton ailable for public inspection at the Baton where | me, this 2nd day of NOTARY PUBLIC SHOULD ENDINGED CONSTABLE STREET OF P.O. Box City Zip Code | ture of Constable Constable |
| and affidavit and is not required for the previously mentioned fisca | me, this 2nd day of NOTARY PUBLIC SHOULD ENDINGED COnstable's Name Street or P.O. Box City | ture of Constable , 20 3 Signature Please Complete this Section: JOEL L ODOM P.O.BOX 1050 JACKSON |

| JOEL ODOM | | |
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| | Pari | sh Constable |
| 2 | | |
| | (City), | Louisiana |
| - | | |
| | 2 eipts an | Pari |

| | General Fund | | Garnishment Fund Activity | |
|--|-----------------|------|------------------------------|---|
| CASH RECEIPTS 1 State & Parish salary (required, from W-2 Form) | 1 | 2000 | | |
| 2 Fees collected (As constable, if any were collected) | 2 | 0 | | |
| 3 Garnishments collected (If applicable) | | | 3 | 0 |
| 4 Other | 4 | 0 | | |
| 5 Total cash receipts. Add lines 1 through 4 | 5 | 2000 | • | |
| CASH DISBURSEMENTS | | | | |
| 6 Operating expenses (rent, utilities, phone/fax line, etc.) | 6 | 2000 | | |
| 7 Materials and supplies (stationery, postage, etc.) | 7 | | | |
| 8 Travel and other charges | | | | |
| 8a For yourself | 8a | | | |
| 8b For employees (If applicable) | 8b | | | |
| Cost of equipment purchased (fax machine, etc.) | 9 | | | |
| 10 Garnishments paid to others [From total collections on Line 3] | | | 10 | 0 |
| 11 Total disbursements (add lines 6-10) | 11 | 2000 | | |
| 12 Balance Available (loss) for payment of salaries (Line 5 – Line 11) $$ | 12 | 0 | 12 | |
| Salary and related benefits | | | | |
| 13 Amount retained by yourself from line 12 as salary | 13 | 0 | 13 | |
| 14 Amount paid to employees (if applicable) | 14 | | 14 | |
| 15 Total salaries paid (add lines 13 and 14) | 15 | 0 | 15 | |
| FUND BALANCE 16 Increase (decrease) in fund balance, may be \$0 | | | | |
| (line 12 less line 15) | <u>16</u> | 0 | 16 | 0 |
| 17 Fund Balance at beginning of the year, may be \$0 (Ending Fund balance from last year's report) | 17 | 0 | 17 | 0 |
| 18 Fund balance (deficit) at end of the year, may be \$0 (Add lines 16 and 17) | 18 | 0 | 18 | 0 |

| JOEL L | (Your Name) | |
|----------------------------|--------------------|------------------------|
| EAST FELICIANA | Pa | rish Constable |
| of Ward/District | 2 | |
| JACKSON | (| City) Louisiana |
| Balance Sheet, on December | er 31, <u> </u> 2(| 012 |

| | | | General Fund | | nishment Fund pplicable) | | Total |
|---|---------|----|-----------------|----------------|--------------------------------|----|-------|
| ASSETS: | | | | | | | |
| 1 Cash | | 1 | 0 | | | | |
| 2 Investments | | 2 | 0 | | | 2 | |
| 3 Office furnishings (Cost of desl | | 3 | 0 | | | 3 | |
| 4 Equipment (Cost of fax machin | e, etc) | 4 | 0 | | | 4 | |
| 5 Total Assets (add lines 1 - 4) | | 5 | 0 | _ 5 | | 5 | |
| LIABILITIES AND FUND BALANCE | CE: | | | | | | |
| 6 Cash overdraft | | 6 | 0 | | | 6 | |
| 7 Garnishments due to others | | | 0 | _ 7 | | 7 | |
| 8 Other liabilities | | 8 | 0 | _ | | 8 | |
| 9 Total Liabilities (add lines 6 - | 8) | 9 | 0 | 9 | | 9 | |
| Fund Balances | | | | | | | |
| 10 Ending Fund balance (from line 18, Statement A) | | 10 | 0 | 10 | 0 | 10 | 0 |
| 11 Other - | | 11 | Ó | | 0 | 11 | 0 |
| 12 Total Liabilities and Fund Ba | ılance | | | | | | |
| (add lines 9 - 11) | | 12 | 0 | <u> 12</u> | 0 | 12 | 0 |

Note. Line 5 (Total Assets) should equal Line 12 (Total Liabilities and Fund Balance)